

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	GKNG 1282 PCT
First Named Inventor	ARTUR GRUNWALD, ET AL.
COMPLETE IF KNOWN	
Application Number	10 / 575,730
Filing Date	APRIL 13, 2006
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AXIAL SETTING DEVICE

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 04/13/2006 as United States Application Number or PCT International

Application Number 10/575,730 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, Inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
PCT/EP 2004/010788	EPO	09/25/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
103 49 030.2	GERMANY	10/13/2003	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
or Bar Code Label **027258** OR Correspondence address below

ROBERT P. RENKE
ARTZ & ARTZ, P.C.

Name

28333 TELEGRAPH ROAD
SUITE 250

Address

City **SOUTHFIELD**

State **MI**

ZIP **48034**

Country **U.S.A.**

Telephone **248-223-9500**

Fax **248-223-9522**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

ARTUR

Family Name
or Surname

GRUNWALD

Inventor's
Signature

Date

17.05.2006

Residence: City **NÜMBRECHT**

State

GERMANY
Country

Citizenship **GERMAN**

Mailing Address
ORCHIDEENWEG 18

City **NÜMBRECHT**

State

ZIP **D-51588**

Country **GERMANY**

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

HANS-PETER

Family Name
or Surname

NETT

Inventor's
Signature

Date

5.06.2006

Residence: City **ADENAU**

State

GERMANY
Country

Citizenship **GERMAN**

Mailing Address
ZUM ECKERNAUM 14

City **ADENAU**

State

ZIP **D-53518**

Country **GERMANY**

Additional Inventors are being named on the **1** supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/02A (09-04)

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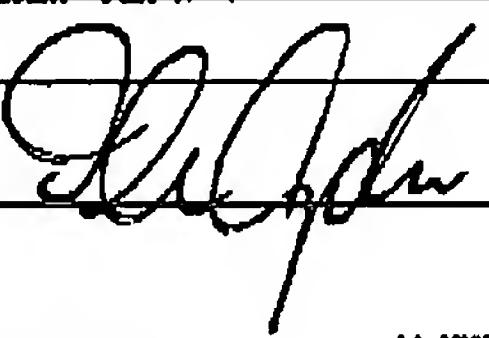
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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) 		Family Name or Surname GASSMANN	
Inventor's Signature		Date 17.5.06	
SIEGBURG Residence: City	State	GERMANY Country	GERMAN Citizenship
EICHENDORFFSTRASSE 60			
Mailing Address			
SIEGBURG City	State	D-53721 Zip	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) 		Family Name or Surname TERFLOTH	
Inventor's Signature		Date 6.7.2006	
REMSCHEID Residence: City	State	GERMANY Country	GERMAN Citizenship
FLIEDERWEG 17			
Mailing Address			
REMSCHEID City	State	D-42899 Zip	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) 		Family Name or Surname BACHMANN	
Inventor's Signature		Date 6.7.2006	
OBERSINN Residence: City	State	GERMANY Country	GERMAN Citizenship
HARTBERG 3A			
Mailing Address			
OBERSINN City	State	D-97791 Zip	GERMANY Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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031020

PTO/SB/61 (11-04)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/575,730
Filing Date	APRIL 13, 2006
First Named Inventor	ARTUR GRUNWALD, ET AL.
Title	AXIAL SETTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1282 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

027256

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

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OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
City	State	Zip
Country		
Telephone	Fax	

I am the:

- Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	JOSEF BACHMANN	Date	6.7.2006
Name	<i>Bachmann</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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03/02/06

PTO/SB/81 (11-04)

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**POWER OF ATTORNEY
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INDICATION FORM**

Application Number	10/575,730
Filing Date	APRIL 13, 2006
First Named Inventor	ARTUR GRUNWALD, ET AL.
Title	AXIAL SETTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1282 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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 Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	BERNHARD TERFLOTH	Date	6.7.2006
Name	<i>B. Terfloth</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 Total of 5 forms are submitted.

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Application Number	10/575,730
Filing Date	APRIL 13, 2006
First Named Inventor	ARTUR GRUNWALD, ET AL.
Title	AXIAL SETTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1262 PCT

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I hereby appoint:

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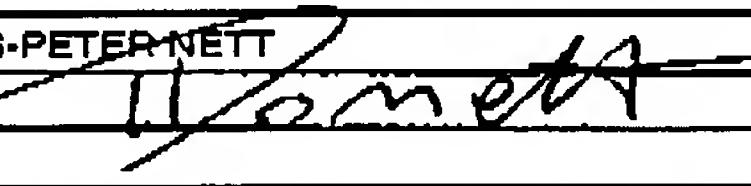
<input type="checkbox"/>	Firm or Individual Name		
Address			
City		State	Zip
Country			
Telephone		Fax	

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Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	HANS-PETER NETT 	Date	5.06.2006
Name		Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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INDICATION FORM**

Application Number	10/575,730
Filing Date	APRIL 13, 2006
First Named Inventor	ARTUR GRUNWALD, ET AL.
Title	AXIAL SETTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1282 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

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OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

 The address associated with Customer Number:

<input type="checkbox"/>	Firm or Individual Name		
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature	ARTUR GRUNWALD	Date	11.05.2006
Name	<i>Spelsberg</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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INDICATION FORM**

Application Number	107575,730
Filing Date	APRIL 13, 2006
First Named Inventor	ARTUR GRUNWALD, ET AL.
Title	AXIAL SETTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1282 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

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OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

The address associated with Customer Number:

OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
City	State	Zip
Country		
Telephone	Fax	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	THEODOR GASSMANN	Date	17.5.06
Name	<i>Theodor Gassmann</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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